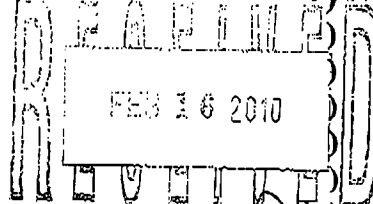


STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

OFFICE OF REGULATORY STAFF



BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2010 - 72 - 1

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

Harpers Limo Service

(Please type or print)

Submitted by: Caleb Harper

Telephone: 843 - 766 - 1305

Address: 1925 Belgrade Avenue
Charleston, S.C. 29407

Fax: _____

Other: _____

Email: _____

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

☐ Application - Class A/A Restricted

☐ Application - Class C Taxi

☒ Application - Class C Charter

☐ Application - Class C Charter Bus

☐ Application - Class C Non-Emergency

☐ Application - Class C Stretcher Van

☐ Application - Class E Household Goods

☐ Application - Class E Hazardous Waste

☐ Application

☐ Request for Extension to Comply with Order

☐ Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded

☐ Request for Cancellation of Certificate

☐ Request for Suspension

☐ Request for Reinstatement

☐ Request for Name Change on Certificate

☐ Request to Amend Scope of Authority

☐ Request to Amend Tariff (rate increase, etc.)

☐ Request to Amend Passenger Limit

☒ Request expedite

☐ Exhibit

☐ Late-Filed Exhibit

☐ Letter

☐ Proposed Order

☐ Publisher's Affidavit

☐ Reservation Letter

☐ Response

☐ Return to Petition

☐ Other: _____

RECEIVED

FEB 19 2010

PSC SC
CLERK'S OFFICE

RECEIVED
FEB 17 2010
PSC SC
CLERK'S OFFICE

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

[Handwritten signature]

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
101 Executive Center Drive, Suite 100
Columbia, South Carolina 29210
(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100 Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR
OPERATION OF MOTOR VEHICLE CARRIER

RECEIVED

Date:

2-8-2010
~~Dec 15, 2009~~

CLASS C - CHARTER

FEB 16 2010

ORS
T,T,W,W/W

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

Caleb Harper d/a

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

~~Caleb Harper~~

HARPERS Limo Service, LLC

1925 Belgrade Avenue

Street Address of Applicant

Charleston, S.C. 29407

Mailing Address of Applicant if different from street address

843-766-1305

Phone

Fax

Email Address

2. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, attach SC Secretary of State "Foreign Corporation" Certificate.)

3. Select Entity Type: (Check one)

☒ Individual Owner/Sole Proprietorship

☐ Partnership - List names and address of all person having an interest in the business.

☒ Corporation - List names and addresses of two principal officers.

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance at Time Application is Filed:

Month Dec Year 2009

Assets:

Cash	500
Receivables	
Real Estate	
Buildings and Equipment (Net)	
Motor Vehicles (Net)	10,000
Garage Equipment (Net)	
Machinery and Tools (Net)	
Supplies on Hand	
Prepays and Other Assets	
Total Assets	10,500
<u>Liabilities and Equity:</u>	
Accounts Payable	
Notes Payable	
Mortgages Payable	
Equipment Obligations	
Accrued Salaries and Wages	
Other Accrued Obligations	
Other Liabilities	
Total Liabilities	0
Capital Stock	
Retained Earnings	
Total Equity	0
Total Liabilities and Equity	10,500

PROPOSED RATES AND CHARGES FOR SERVICE

Maximum Proposed Rates and Charges for Service are as follows:

* 85 ⁰⁰/_{pen} Hour
~~Hour~~

Counties to be Served:

Statewide

Maximum Number of Passengers per Vehicle:

7

DESCRIPTION OF EQUIPMENT

[illegible]

INSURANCE QUOTE

This form **MUST BE COMPLETED AND SIGNED** by an **AUTHORIZED INSURANCE COMPANY REPRESENTATIVE**.

The following insurance quote is for:

Caleb Harper dba Harper's Limo Service
Name of Motor Carrier

Address of Motor Carrier

Amount of Premium:

Limits Quoted: (See Below)

Liability Insurance \$ 1,221

Limits 350,000 CSL

The above quoted premium is for a term of 12 months.

Minimum Limits - Intrastate Only:

1-7 Passengers \$ 25,000/50,000/25,000
8-15 Passengers \$ 25,000/100,000/25,000

Filing Made

See
attached
Filing (E)
(Has wrong name)

Hartford Fire
Name of Insurance Company

690 Asylum Ave, Hartford CT 06185
Home Office Address of Company

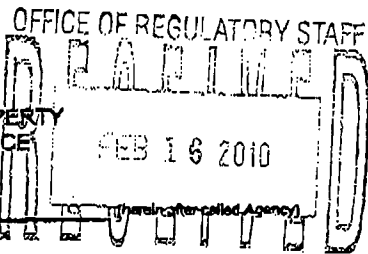
I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

2-17-10
Date

[Signature]
Authorized Insurance Company Representative's Signature

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested.

Form E
UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY
DAMAGE LIABILITY CERTIFICATION OF INSURANCE



Filed with South Carolina Department of Motor Vehicles
(Name of Agency)

This is to certify that the Hartford Fire Insurance Company
(Name of Company)
(herein after called Company) of 690 Asylum Ave, Hartford, CT, 06115
(Home Address of Company)

has issued to HARPER'S LIMO SERVICE LLC of 1925 BELLGRADE AVE, CHARLESTON, SC, 29407
(Name of Motor Carrier) (Address of Motor Carrier)

A policy or policies of insurance effective from 07/24/2009 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled as provided herein, which by attachment of the Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Agency has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Agency a duplicate original of said policy or policies and all endorsements thereon. This certificate and the endorsement described herein may not be cancelled without cancellation of the policy to which it is attached. Such cancellation may be effective by the Company or the insured giving thirty (30) days' notice in writing to the State Agency, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Agency.

8711 University East Dr
Hartford Building
Countersigned at Charlotte NC 28213 This 10th day of Feb, 20 10
(Address) (Day) (Month) (Year)

Insurance Company File No. 22 UEC BC9051
(Policy No)

David J Brenner
David Brenner
(Authorized Company Representative)

Underlying Limit :0.00

Liability Limit :250,000.00

needs to read
Caleb Harper dba Harper's Limo
Service
mr. Harper stated that he is not
an "LLC"

Exhibit FWA

Harper's Limo Service, LLC

Name of Applicant

1. Are there currently any outstanding judgments against the Applicant?

☐ Yes

☒ No

If Yes, indicate nature of judgement(s) against applicant.

2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?

☒ Yes

☐ No

3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

☒ Yes

☐ No

Exhibit on Driver Qualifications

1. Applicant understands that all drivers must be a minimum of 18 years of age.

☒ Yes

☐ No

2. Applicant understands that a certified copy of the driver's three (3) year driving record issued by the SC DMV and such record from the DMV of the state in which the driver is or has been domiciled for such period must be maintained in the Applicant's business office.

☒ Yes

☐ No

3. Applicant understands that a criminal history background check from the state where the driver currently lives must be maintained in the Applicant's business office.

☒ Yes

☐ No

4. Applicant understands that all drivers operating a vehicle under a Class C Charter Certificate must have in their possession when operating a charter vehicle, a valid driver's license issued by the SC DMV or the current state of residence of the driver.

☒ Yes

☐ No

5. Applicant understands that all Class C Charter Certificate holders are prohibited from employing or leasing vehicles to drivers who are registered, or required to be registered, as sex offenders with the South Carolina State Law Enforcement Division or any national registry of sex offenders.

☒ Yes

☐ No

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
POST OFFICE DRAWER 11649
COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann.,1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOUTH CAROLINA)

COUNTY OF Charleston)

Caleb Harper
Applicant's Signature

I, Caleb Harper, owner
Name of Applicant's Representative Title

of Harper's Limo Service,
Applicant

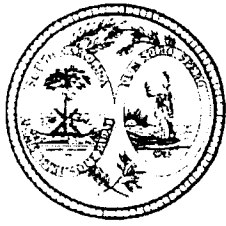
the Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Caleb Harper
Signature of Applicant's Representative

SWORN TO BEFORE ME
This 15 day of Dec, 2009

Jan Dean
Notary Public

Commission Expires 8-27-2017



Jocelyn G. Boyd
Interim Chief Clerk/
Administrator
Phone: (803) 896-5133
Fax: (803) 896-5246

The Public Service Commission State of South Carolina

COMMISSIONERS
Elizabeth B. "Lib" Fleming, Fourth District
Chairman
John E. "Butch" Howard, First District
Vice Chairman
David A. Wright, Second District
Randy Mitchell, Third District
G. O'Neal Hamilton, Fifth District
vacant, Sixth District
Swain E. Whitfield, At-Large

Clerk's Office
Phone: (803) 896-5100
Fax: (803) 896-5199

February 17, 2010

TO: Caleb Harper d/b/a Harper's Limo Service
1925 Belgrade Avenue
Charleston, SC 29407

FROM: Janice Schmieding, Docketing Department

YOUR APPLICATION IS BEING RETURNED FOR THE FOLLOWING REASON(S):

XXX Failed to submit Notarized Signature on Page 8

Once you have enclosed the above-mentioned item(s) in order for the Application to be processed, please re-submit the Application to the Public Service Commission of South Carolina, Attn: Clerk's Office, Post Office Box 11649, Columbia, South Carolina 29211.

SHOULD YOU HAVE ANY QUESTIONS, PLEASE CALL (803) 896-5240.

cc: Carole Chauvin, Office of Regulatory Staff (via e-mail)